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1 of 2

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Bib Data Sheet

CONFIRMATION NO. 1593

<b>SERIAL NUMBER</b> 10/690,774	<b>FILING OR 371(c) DATE</b> 10/22/2003 <b>RULE</b>	<b>CLASS</b> 424	<b>GROUP ART UNIT</b> 1616	<b>ATTORNEY DOCKET NO.</b> 14072-035001 / W 616
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## APPLICANTS

Scott H. Gillis, Concord, MA;  
Paul Schechter, Dover, MA;  
James Alexander Robert Stiles, Toronto, CANADA;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CIP of 09/628,735 07/27/2000 ABN and is a CIP of 09/916,757 07/27/2001 PAT 6,692,773 and is a CIP of 09/840,637 04/23/2001 PAT 7,008,647 and is a CIP of 10/128,208 04/23/2002 PAT 6,989,156 which claims benefit of 60/285,884 04/23/2001  
This application 10/690,774 is a CIP of 10/131,509 04/23/2002 PAT 7,087,249 and is a CIP of 10/131,511 04/23/2002 PAT 6,939,568 and is a CIP of 10/131,568 04/23/2002 ABN and is a CIP of 10/159,587 05/30/2002 PAT 7,001,617 and is a CIP of 10/277,873 10/22/2002 ABN and is a CIP of 10/277,356 10/22/2002 ABN and is a CIP of 10/277,298 10/22/2002 PAT 6,989,157 and is a CIP of 10/277,362 10/22/2002 ABN and is a CIP of 10/277,358 10/22/2002 and is a CIP of 10/277,320 10/22/2002 ABN

*See Next Page for Corrected Continuing Data* →

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

*None*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\*

01/22/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 5	TOTAL CLAIMS 276	INDEPENDENT CLAIMS 21
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	Initials			

## ADDRESS

26161

## TITLE

Metal-containing materials

<b>FILING FEE RECEIVED</b> 1026	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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